



APPLICATION FOR RECORDS RETENTION SCHEDULE

OFFICE OF THE SECRETARY OF STATE
DEPARTMENT OF ARCHIVES AND HISTORY
RECORDS MANAGEMENT DIVISION

INSTRUCTIONS: See Publication No. 76-RM-1 for instructions on completing this form. Forward signed original to Department of Archives and History, Records Management Division, 330 Capitol Avenue, Atlanta, Georgia, 30334, Attention: Scheduling Section.

| FOR AGENCY USE | | FOR RECORDS MANAGEMENT USE | |
|--|--|---|--------------------------------------|
| Application Date | 1. Agency Address Ga. Department of Public Safety Commissioner's Office P.O. Box 1456 Atlanta, Georgia 30301 | Application Number 76-75-A | |
| Application Number | | Date Received NOV 19 1979 | Date Completed DEC 31 1979 |
| 2. Person to Contact Nancy Davis | | Working Title Secretary | Telephone Number 5704 |
| 3. Action Requested a. <input type="checkbox"/> Establish Retention Schedule; record will continue to accumulate. b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated. c. <input checked="" type="checkbox"/> Amend Application No. 76-75 Check One: <input checked="" type="checkbox"/> Change; <input type="checkbox"/> Supercede; <input type="checkbox"/> Void | | | |
| 4. Dates of Series Earliest 7-1-77 Latest present | | 5. Records Series Title (followed by title used in office, if different) Revoked Driver's License Correspondence File | |
| 6. Division and Office Function What is the function of the Division and the Office in which this record series is created? The Commissioner of Public Safety is responsible for the direction of activities of the Department in the functional areas of criminal investigation; law enforcement; and public safety. The Commissioner's Office formulates policy and provides leadership to the Department in the accomplishment of the Departmental mission. | | | |
| 7. Record Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file. Documents relating to: Reinstating revoked driver's licenses Included are: Confidential letters from Senators, Representatives or people in authority, requesting assistance in the reinstatement of revoked driver's license; also letters from judges changing pleas to enable licensee to keep license. File is arranged: Alphabetically by name then chronologically by date | | | |
| 8. Monthly Reference Rate How often are records referred to which are: One to six months old 3 ; Seven to twelve months old 1 ; Thirteen to twenty-four months old 0 ; twenty-five months and older ? | | | |
| 9. Annual Rate of Accumulation of Records Letter-size drawers 1 ; Legal-size drawers _____; Shelves _____; Other (specify) _____ | | | |

| YES | NO | 10. Questionnaire (Place an "X" in the proper column) |
|-----|----|--|
| X | | a. Is this the official copy of the series? If not, where is it? |
| | X | b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation. |
| | X | c. Is this a vital record? |
| | X | d. Does this series have historical or long term research value? |
| N/A | | e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately? |
| | X | f. Is the information contained in this series ever published? If yes, attach copy. |
| | X | g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy. |
| | X | h. Is there a duplication of this series in your office, or in another office or agency? If yes, where? |
| | X | i. Is this series (or a major portion of it) regularly microfilmed? |
| | X | j. Does the record series result in a computer printout? |

11. Retention Requirements

The following requires the series to be kept:

- | | | | |
|--------------------------|--------------|-----------------------------------|----------------|
| a. State Law | _____ years. | d. Audit period | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need | 1 _____ years. |
| c. Federal law | _____ years. | f. Federal retention instructions | _____ years. |

Attach copy or excerpt of laws or regulations. Explain administrative need.

12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☒ Calendar Year; ☐ Fiscal Year; ☐ Other _____ then,

- ☒ Hold in the current files area _____ month(s) 1 _____ year(s); then
- ☐ Transfer to local holding area, hold _____ year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☒ Destroy.
- ☐ Transfer to State Archives for permanent retention.
- ☐ Other (Specify) _____

() Concur

() Nonconcur

Ing. W. F. Linsman
Special Aide to the Commissioner

These instructions apply to all prior and future accumulations of the series.

| Agency Head/Designee (Signature) | Date | Records Management Officer (Signature) | Date |
|--|-----------|--|----------|
| <i>[Signature]</i> | 7 Nov. 79 | <i>Lee Wilson CRM</i> | 10/31/79 |
| Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.) | | State Records Committee (Signature) | Date |
| | | <i>[Signature]</i> | 12-27-79 |
| State Auditor/Designee | | <i>Carroll Hart</i> | 12-21-79 |
| Secretary of State/Designee | | <i>[Signature]</i> | 12-28-79 |
| Attorney General/Designee | | | |



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|---|---|-------------------------------------|--------------------------------|
| 1. Application Date | INSTRUCTIONS: See separate instructions for completion of front and reverse of this form. Sign original and two copies and forward to Department of Archives and History, Attention: Records Management Officer. | FOR RECORDS MANAGEMENT DIVISION USE | |
| 2. Agency Application No. | | Date Received | Application No. Date Completed |
| 3. AGENCY, Division, Subdivision & Administering Office Address Georgia Department of Public Safety 959 E. Confederate Ave., S. E. <i>Uniform Division</i> Atlanta, Georgia 30316 (Commanding Officer and Adjutant General) | | 4. Person to Contact Nancy Davis | 5. Working Title Secretary |
| | | 6. Tel. No. 6083 | |

7. ACTION REQUESTED

☒ ESTABLISH DISPOSITION STANDARD; RECORD WILL CONTINUE TO ACCUMULATE. ☐ DISPOSE OF PRESENT ACCUMULATION; NO FURTHER ACCUMULATION ANTICIPATED.

| | |
|--|---|
| 8. Earliest & Latest Dates of Series 1974 - present | 9. Exact Series Title Revoked Driver's License Correspondence File |
|--|---|

10. What is the function of the office in which this record series is created?
Department of Public Safety - Uniform Division - The Uniform Division is responsible for the patrol of streets and highways of this state to insure the safety of lives, injuries, and property, to investigate motor vehicle accidents, to be available for civil disorders or natural disasters, licensing of citizens to operate motor vehicles, suspension or revocation of license, accident investigation and computation of related statistics, supervises motor vehicle inspection records and distribution of motor vehicle inspection stickers and other documents and insure the safety of the Governor of the State of Georgia and his family.

11. This file contains the following documents (include form numbers and titles, if any, and file arrangement).
Documents relating to reinstating revoked drivers' licenses.

File includes - Confidential letters from Senators, Representatives or people in authority, requesting assistance in the reinstatement of revoked driver's license; also letters from judges changing pleas to enable licensee to keep license.

File arranged - Chronologically.

ATTACH SAMPLES OF THE FILE

| | | | | | |
|--------------------------|----------------|--------------------|------------------------------------|----------------|--------------------|
| 12. EQUIPMENT OCCUPIED | No. of Drawers | Cu. Ft. of Records | ANNUAL RATE OF ACCUMULATION | No. of Drawers | Cu. Ft. of Records |
| Letter-size File Drawers | 1/2 | 1 | | 1/2 | 1/2 |
| Legal-size File Drawers | | | Floor Space Occupied (Square Feet) | In Office(s) | In Storage Area(s) |
| | | | | This Year's | Last Year's |
| | | | AVERAGE DAILY REFERENCES | 4 | 2 |
| | | | | 1 | |

QUESTIONNAIRE

Place an "x" in the proper column. If answer is "YES," please explain

13. Is this the Record Copy of the series? YES NO
[X] []
14. Is there a duplication of this series in another office or agency?
(Some) Colonel's Office. YES NO
[X] []
15. Is the information contained in this series ever summarized or published?
Attach copy of summary or publication. YES NO
[] [X]
16. Does the series contain classified information requiring security handling? YES NO
[] [X]
17. Does the series initiate, amend or terminate agency policies and procedures? YES NO
[] [X]
18. Could the function be performed if the files were lost or destroyed? YES NO
[X] []
19. Is the series (or major portion of it) regularly microfilmed? If yes, why? YES NO
[] [X]
20. Does the record series provide data as input to an EDP file? YES NO
[] [X]
21. Does the record series contain documentation produced as EDP printout? YES NO
[] [X]
22. Has the Federal Government issued instructions governing the retention/disposition of these files? YES NO
[] [X]
23. Will there be a need for these records 10, 15 years from now? If yes, what? YES NO
[] [X]

24. REQUIREMENTS. The following requires the files to be kept 2 years:

- a. [] STATE LAW b. [] STATUTE OF LIMITATION c. [] AUDIT PERIOD d. [] FEDERAL LAW e. [X] ADMINISTRATIVE DECISION f. [] HISTORICAL VALUE
(Cite Law, Statute, or other reason for the retention requirement)

25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at the end of each - [X] CALENDAR YEAR - [] FISCAL YEAR - [] OTHER _____, then:

- [X] Hold in the current files area _____ month(s)/ 2 year(s):
[] Transfer to [] State Records Center [] Local Holding Area; hold _____ year(s):
[X] Destroy.
[] Transfer to State Archives for permanent retention.
[] Destroy immediately after cut-off.
[] Other: (Specify)

- (✓) Concur
() Nonconcur

[Signature]
Adjutant

(Indicate briefly rationale for recommendations above/or write additional remarks):

| Records Management Officer (Signature) | Date | OTHER REQUIRED SIGNATURES | DATE |
|--|---|---------------------------|---------|
| <i>[Signature]</i> | 3-3-76 | <i>[Signature]</i> | 3-4-76 |
| 26. Recommendations in paragraph 25 are: | Agency Head/Designee [X] Approved [] Disapproved | <i>[Signature]</i> | 3-11-76 |
| | State Auditor/Designee [X] Approved [] Disapproved | <i>[Signature]</i> | 3-10-76 |
| | Secretary of State/Designee [X] Approved [] Disapproved | <i>[Signature]</i> | 3-12-76 |
| | Attorney General/Designee [X] Approved [] Disapproved | <i>[Signature]</i> | |

STATE RECORDS COMMITTEE